PTO/SB/06 (12-04)
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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | | | ss it displays a valid OMB control number. Application or Docket Number. | | |
|---|---|---|---|---|---|---|--------------------|-----------------------------|---|--------------------|------------------------------|
| | Α | ED – PART Í | | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | | | |
| FOR | | NUME | BER FILED | NUMB | ER EXTRA | 1 | RATE (\$) | FEE (\$) | 1 | DATE (\$) | FEE (\$) |
| BASIC FEE | | | | | | 1 | 10015 (4) | LEE (\$) | 1 | RATE (\$) | FEE (\$) |
| (37 CFR 1.16(a), (b), or (o)) SEARCH FEE | | | | | | 1 | | | 1 | | <u> </u> |
| (37 CFR 1.16(k), (i), or (m)) EXAMINATION FEE | | n)) | | | | ┨ | | | ļ | | |
| (37 CFR 1.16(o), (p), or (q)) | | q)) | . , | | | | | |] . | | |
| TOTAL CLAIMS (37 CFR 1.16(i)) | | 17 | minus 20 = * ` | | | | X = | | OR | X = | |
| INDEPENDENT CLAIMS (37 CFR 1.16(h)) | | IMS | minus 3 = | | | 1 | x = | | | | |
| API FE | PLICATION SIZE | sheets o is \$250 (additions | If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | ^ - | | | X = | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(J)) | | | | | | | | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | TOTAL | | 1 | TOTAL | |
| APPLICATION AS AMENDED – PART II 3/8/06 (Column 1) (Column 2) (Column 3) SMALL EN | | | | | | | | ENTITY | OR | OTHER SMALL | |
| AMENDMENT A ~ | <i>(</i> | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (\$) | | RATE (\$) | ADDI- TIONAL FEE (\$2) |
| | Total (37 CFR 1.16(i)) | .37 | Minus | " 38 | = / | | ×25 = | | OR | x50 = | |
| | Independent (37 CFR 1.16(h)) | . 4 | Minus | ··· 4 | = / | | x//)() = | 1/ | OR | x-200)= | |
| ME | Application Size | plication Size Fee (37 CFR 1.16(s)) | | / | ' / | | | 1/ | UK . | - XXCC- | / |
| ۷, | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.15(1)) | | | | | | 180 | V. | OR | 3(0) | |
| | | | | , | | 4 | TOTAL ADD'L FEE | 1 | OR | TOTAL ADD'L FEE | |
| | | (Column 1) | | (Column 2) | (Column 3) | | 1 | · | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (\$) | | RATE (\$) | ADDI- TIONAL FEE (\$) |
| | Total (37 CFR 1.16(i)) | • | Minus | ** | = | | X = | | OR | x = | |
| | Independent (37 CFR 1.16(h)) | • | Minus | *** | = | | x = | | OR | x = | |
| M | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | | | |
| _ \ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | OR | | |
| | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 enter "20" | | | | | | | | | | | |

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN SMALL ENTITY OR (Column 1) SMALL ENTITY (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) FEE (\$) **BASIC FEE** (37 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(k), (i), or (m)) **EXAMINATION FEE** (37 CFR 1.16(o), (p), or (q)) **TOTAL CLAIMS** (37 CFR 1.16(I)) minus 20 = x 50 OR INDEPENDENT CLAIMS (37 CFR 1.16(h)) minus 3 ×10D = 200= 20O If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each FEE (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(I)) 80 * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE (\$) ADDI-RATE (\$) ADDI-**PREVIOUSLY EXTRA AFTER** TIONAL TIONAL IENT AMENDMENT PAID FOR FEE (\$) FEE (\$) Total (37 CFR 1,16(i)) Minus OR ENDS Independent (37 CFR 1.16(h)) Minus OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16()) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE (\$) ADDI~ RATE (\$) ADDI-**AFTER** PREVIOUSLY TIONAL TIONAL ENDMENT MENDMENT PAID FOR FEE (\$) **FEE (\$)** Minus Total -(37 CFR 1.16(i)) OR Independent (37 CFR 1.16(h)) Minus OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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